

RON THORNBURGH
Secretary of State



REVISED
[]

Memorial Hall, 1st Floor
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Topeka, KS 66612-1594
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STATE OF KANSAS

January 25, 2007

To Whom It May Concern:
Amended State HAVA Funding Reports
U.S. Election Assistance Commission
1225 New York Avenue, NW – Suite 1100
Washington, DC 20005

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Amended HAVA Title I, Sections 101 Funding Report

This is to certify the State of Kansas' Title I expenditures with respect to the categories of activities described for the permissible use of funds in HAVA sections 101(b).

Attached are the following documents:

1. Standard Form 269 (Long Form)
2. HAVA Calendar Year 2003-2005 Expenditures – A detailed breakdown of expenditures and how they meet requirements of HAVA and the Kansas State Plan
3. State Plan Table of Contents – to reflect money spent to conform with state plan

Sincerely,

A handwritten signature in cursive script that reads "Craig Bourne".

Craig Bourne
HAVA Coordinator
Kansas Secretary of States Office
785-296-0080
CraigB@kssos.org

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FINANCIAL STATUS REPORT
(Long Form)

(Follow instructions on the back)



1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Election Assistance Commission		2. Federal Grant or Other Identifying Number Assigned By Federal Agency HAVA Title 1, 101		OMB Approval No. 0348-0039	Page of pages
3. Recipient Organization (Name and complete address, including ZIP code) Kansas Secretary of State First Floor, Memorial Hall 120 S.W. 10th Ave. Topeka, KS 66612-1594					
4. Employer Identification Number FEIN #48-6029925		5. Recipient Account Number or Identifying Number CDFA #39.011		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual					
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 4/10/2003		To: (Month, Day, Year) Until Disbursed		9. Period Covered by this Report From: (Month, Day, Year) 1/1/2003	
				To: (Month, Day, Year) 12/31/2003	
10. Transactions:					
		I Previously Reported	I This Period	III Cumulative	
a. Total outlays			47,182.37	47,182.37	
b. Refunds, rebates, etc.			0.00	0.00	
c. Program income used in accordance with the deduction alternative			0.00	0.00	
d. Net outlays (Line a, less the sum of lines b and c)		0.00	47,182.37	47,182.37	
Recipient's share of net outlays, consisting of:					
e. Third party (in-kind) contributions			0.00	0.00	
f. Other Federal awards authorized to be used to match this award			0.00	0.00	
g. Program income used in accordance with the matching or cost sharing alternative			0.00	0.00	
h. All other recipient outlays not shown on lines e, f or g			0.00	0.00	
i. Total recipient share of net outlays (Sum of lines e, f, g and h)		0.00	0.00	0.00	
j. Federal share of net outlays (line d less line i)		0.00	47,182.37	47,182.37	
k. Total unliquidated obligations				0.00	
l. Recipient's share of unliquidated obligations				0.00	
m. Federal share of unliquidated obligations				0.00	
n. Total Federal share (sum of lines j and m)				47,182.37	
o. Total Federal funds authorized for this funding period				5,022,711.21	
p. Unobligated balance of Federal funds (Line o minus line n)				4,975,528.84	
Program Income, consisting of:					
q. Disbursed program income shown on lines c and/or g above				0.00	
r. Disbursed program income using the addition alternative				0.00	
s. Undisbursed program income				0.00	
t. Total program income realized (Sum of lines q, r and s)				0.00	
11. Indirect Expense	a. Type of Rate (Place "X" in appropriate box) <input checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
	b. Rate	c. Base	d. Total Amount	e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. Interest earned in 2003 for HAVA Title 1 was \$22,711.21. Supporting documents enclosed.					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
Typed or Printed Name and Title Craig Bourne, HAVA Coordinator			Telephone (Area code, number and extension) (785) 296-0080		
Signature of Authorized Certifying Official <i>Craig Bourne</i>			Date Report Submitted January 25, 2007		

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